CONSORT-EHEALTH (V 1.6.1) -Submission/Publication Form

The CONSORT-EHEALTH checklist is intended for authors of randomized trials evaluating webbased and Internet-based applications/interventions, including mobile interventions, electronic games (incl multiplayer games), social media, certain telehealth applications, and other interactive and/or networked electronic applications. Some of the items (e.g. all subitems under item 5 description of the intervention) may also be applicable for other study designs

The goal of the CONSORT EHEALTH checklist and guideline is to be a) a guide for reporting for authors of RCTs, b) to form a basis for appraisal of an ehealth trial (in terms of validity)

CONSORT-EHEALTH items/subitems are MANDATORY reporting items for studies published in the Journal of Medical Internet Research and other journals / scientific societies endorsing the

Items numbered 1., 2., 3., 4a., 4b etc are original CONSORT or CONSORT-NPT (non-pharmacologic treatment) items.

Items with Roman numerals (i., ii, iii, iv etc.) are CONSORT-EHEALTH extensions/clarifications.

As the CONSORT-EHEALTH checklist is still considered in a formative stage, we would ask that you also RATE ON A SCALE OF 1-5 how important/useful you feel each item is FOR THE PURPOSE Of THE CHECKLIST and reporting guideline (optional).

Mandatory reporting items are marked with a red *.

In the textboxes, either copy & paste the relevant sections from your manuscript into this form please include any quotes from your manuscript in QUOTATION MARKS,

or answer directly by providing additional information not in the manuscript, or elaborating on why the item was not relevant for this study.

YOUR ANSWERS WILL BE PUBLISHED AS A SUPPLEMENTARY FILE TO YOUR PUBLICATION IN JMIR AND ARE CONSIDERED PART OF YOUR PUBLICATION (IF ACCEPTED).

Please fill in these questions diligently. Information will not be copyedited, so please use proper spelling and grammar, use correct capitalization, and avoid abbreviations.

DO NOT FORGET TO SAVE AS PDF_AND_ CLICK THE SUBMIT BUTTON SO YOUR ANSWERS ARE IN OUR DATABASE !!!

Citation Suggestion (if you append the pdf as Appendix we suggest to cite this paper in the caption):

Eysenbach G, CONSORT-EHEALTH Group

CONSORT-EHEALTH: Improving and Standardizing Evaluation Reports of Web-based and Mobile Health Interventions

J Med Internet Res 2011:13(4):e126 URL: http://www.jmir.org/2011/4/e126/ doi: 10.2196/jmir.1923

PMID: 22209829

* Required

Your name *

First Last

YanPing Duan

Primary Affiliation (short), City, Country *

University of Toronto, Toronto, Canada

Hong Kong Baptist University, Hong Kon

Your e-mail address *

!

duanyp@hkbu.edu.hk

Title of your manuscript *

Provide the (draft) title of your manuscript.

Evaluation of a Web-Based Multiple Health Behavior Change Intervention in Patients With Coronary Heart Disease in Home-Based Rehabilitation: Pilot Randomized Controlled Trial in China

Name of your App/Software/Intervention *

If there is a short and a long/alternate name, write the short name first and add the long name in brackets.

Web-based multiple health behavior cha

Evaluated Version (if any)

e.g. "V1", "Release 2017-03-01", "Version 2.0.27913"

Your answer

Language(s) *

What language is the intervention/app in? If multiple languages are available, separate by comma (e.g. "English, French")

Chinese

URL of your Intervention Website or App

 $e.g.\ a\ direct\ link\ to\ the\ mobile\ app\ on\ app\ in\ appstore\ (itunes,\ Google\ Play),\ or\ URL\ of\ the\ website.\ If$ the intervention is a DVD or hardware, you can also link to an Amazon page

Your answer

URL of an image/screenshot (optional)

Your answer

Accessibility *

Can an enduser access the intervention presently?

- access is free and open
- access only for special usergroups, not open
- access is open to everyone, but requires payment/subscription/in-app purchases
- app/intervention no longer accessible
- Other:

!

Primary Medical Indication/Disease/Condition *

e.g. "Stress", "Diabetes", or define the target group in brackets after the condition, e.g. "Autism (Parents of children with)", "Alzheimers (Informal Caregivers of)"

Patients with coronary health disease

Primary Outcomes measured in trial *

comma-separated list of primary outcomes reported in the trial

physical activity and fruit-vegetable con-

Secondary/other outcomes Are there any other outcomes the intervention is expected to affect?
Your answer
Recommended "Dose" * What do the instructions for users say on how often the app should be used?
Approximately Daily
Approximately Weekly
Approximately Monthly
Approximately Yearly
as needed"
Other:
Approx. Percentage of Users (starters) still using the app as recommended after 3 months *
unknown / not evaluated
0-10%
11-20%
21-30%
31-40%
41-50%
51-60%
61-70%
71%-80%
81-90%
91-100%
Other:
Overall, was the app/intervention effective? *
yes: all primary outcomes were significantly better in intervention group vs control
partly: SOME primary outcomes were significantly better in intervention group vs control
on statistically significant difference between control and intervention
or more outcomes
inconclusive: more research is needed
Other:

Article Preparation Status/Stage * At which stage in your article preparation are you currently (at the time you fill in this form)
onot submitted yet - in early draft status
onot submitted yet - in late draft status, just before submission
submitted to a journal but not reviewed yet
submitted to a journal and after receiving initial reviewer comments
submitted to a journal and accepted, but not published yet
published
Other:
Journal * If you already know where you will submit this paper (or if it is already submitted), please provide the journal name (if it is not JMIR, provide the journal name under "other")
onot submitted yet / unclear where I will submit this
Journal of Medical Internet Research (JMIR)
○ JMIR mHealth and UHealth
○ JMIR Serious Games
○ JMIR Mental Health
○ JMIR Public Health
○ JMIR Formative Research
Other JMIR sister journal
Other:
Other: Is this a full powered effectiveness trial or a pilot/feasibility trial? *
Is this a full powered effectiveness trial or a pilot/feasibility trial?
Is this a full powered effectiveness trial or a pilot/feasibility trial?
Is this a full powered effectiveness trial or a pilot/feasibility trial? * Pilot/feasibility
Is this a full powered effectiveness trial or a pilot/feasibility trial? Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-
Is this a full powered effectiveness trial or a pilot/feasibility trial? Pilot/feasibility Pillot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR)
Is this a full powered effectiveness trial or a pilot/feasibility trial? Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR) no ms number (yet) / not (yet) submitted to / published in JMIR
Is this a full powered effectiveness trial or a pilot/feasibility trial? Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR) no ms number (yet) / not (yet) submitted to / published in JMIR Other: 12052
Is this a full powered effectiveness trial or a pilot/feasibility trial? * Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR) no ms number (yet) / not (yet) submitted to / published in JMIR Other: 12052 TITLE AND ABSTRACT
Is this a full powered effectiveness trial or a pilot/feasibility trial? * Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR) no ms number (yet) / not (yet) submitted to / published in JMIR other: 12052 TITLE AND ABSTRACT 1a) Does your paper address CONSORT item 1a? * I.e does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under
Is this a full powered effectiveness trial or a pilot/feasibility trial? * Pilot/feasibility Fully powered Manuscript tracking number * If this is a JMIR submission, please provide the manuscript tracking number under "other" (The ms tracking number can be found in the submission acknowledgement email, or when you login as author in JMIR. If the paper is already published in JMIR, then the ms tracking number is the four-digit number at the end of the DOI, to be found at the bottom of each published article in JMIR) no ms number (yet) / not (yet) submitted to / published in JMIR other: 12052 TITLE AND ABSTRACT 1a) Does your paper address CONSORT item 1a? * Le does the title contain the phrase "Randomized Controlled Trial"? (if not, explain the reason under "other")

1a-i) Identify the mode of delivery in the title
, ,
Identify the mode of delivery. Preferably use "web-based" and/or "mobile" and/or "electronic game'
in the title. Avoid ambiguous terms like "online", "virtual", "interactive". Use "Internet-based" only if
Intervention includes non-web-based Internet components (e.g. email), use "computer-based" or
"electronic" only if offline products are used. Use "virtual" only in the context of "virtual reality" (3-D worlds). Use "online" only in the context of "online support groups". Complement or substitute
product names with broader terms for the class of products (such as "mobile" or "smart phone"
instead of "iphone"), especially if the application runs on different platforms.

Does your paper address subitem 1a-i? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 1a-i.

"Web-based"

1a-ii) Non-web-based components or important co-interventions in title

Mention non-web-based components or important co-interventions in title, if any (e.g., "with telephone support").

subitem not at	\bigcirc					essential
all important	\circ	\circ	\circ	\circ	\circ	essentiai

Does your paper address subitem 1a-ii?

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

1a-iii) Primary condition or target group in the title

Mention primary condition or target group in the title, if any (e.g., "for children with Type I Diabetes")
Example: A Web-based and Mobile Intervention with Telephone Support for Children with Type I
Diabetes: Randomized Controlled Trial

subitem not at	\bigcirc		\bigcirc			essentia
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 1a-iii? *

Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 1a-iii.

and blinding status.

!

"in Patients With Coronary Heart Disease in Home-Based Rehabilitation" "in China".

1b) ABSTRACT: Structured summary of trial design, methods, results, and conclusions

NPT extension: Description of experimental treatment, comparator, care providers, centers,

1b-i) Key features/functionalities/components of the intervention and comparator in the METHODS section of the **ABSTRACT**

Mention key features/functionalities/components of the intervention and comparator in the abstract. If possible, also mention theories and principles used for designing the site. Keep in mind the needs of systematic reviewers and indexers by including important synonyms. (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main

body of text, conside	r adding it)									
subitem not at all important	0	0	0	0	0	essential				
Does your paper address subitem 1b-i? * Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study										
Yes, we have addressed subitem ib-i. "In a randomized controlled trial, 136 outpatients with coronary heart disease from the cardiac rehabilitation center of a hospital in China were recruited. After randomization and exclusion of unsuitable participants, 114 patients were assigned to 1 of the 2 groups: (1) the intervention group: first 4 weeks on PA and subsequent 4 weeks on FVC and (2) the waiting control group. A total of 2 Web-based assessments were conducted, including 1 at the beginning of the intervention (T1, N=114), and 1 at the end of the 8-week intervention (T2, N=83). The enrollment and follow-up took place from December 2015 to May 2016."										
1b-ii) Level of human involvement in the METHODS section of the ABSTRACT Clarify the level of human involvement in the abstract, e.g., use phrases like "fully automated" vs. "therapist/nurse/care provider/physician-assisted" (mention number and expertise of providers involved, if any). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)										
subitem not at all important	0	0	0	0	0	essential				
Does your paper address subitem 1b-ii? Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Your answer										
1b-iii) Open vs. closed, web-based (self-assessment) vs. face-to-face assessments in the METHODS section of the ABSTRACT Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic or a closed online user group (closed usergroup trial), and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment). Clearly say if outcomes were self-assessed through questionnaires (as common in web-based trials). Note: In traditional offline trials, an open trial (open-label trial) is a type of clinical trial in which both the researchers and participants know which treatment is being administered. To avoid confusion, use "blinded" or "unblinded" to indicated the level of blinding instead of "open", as "open" in web-based trials usually refers to "open access" (i.e. participants can self-enrol). (Note: Only report in the abstract what the main paper is reporting. If this information is missing from the main body of text, consider adding it)										
subitem not at all important	0	0	0	0	0	essential				

H

Does your paper address subitem 1b-iii?
Copy and paste relevant sections from the manuscript abstract (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing

additional informatio your study	n not in the	ms, or briefl	y explain wl	ny the item is	not applica	ble/relevant for
Your answer						
1b-iv) RESULT Report number of par (e.g., attrition/adhere primary/secondary o this information is m	rticipants er nce metrics utcomes. (N	rolled/asse , use over ti lote: Only re	ssed in eacl me, number port in the a	n group, the of logins etc of logins etc obstract what	use/uptake c.), in addition t the main p	of the intervention on to
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste relev "like this" to indicate additional informatio your study	ant sections direct quote	s from the m s from your	nanuscript a manuscript	bstract (inclu :), or elaborat	te on this ite	m by providing
Your answer						
1b-v) CONCLU Conclusions/Discuss negative (primary out negative results are a abstract what the ma consider adding it)	sions in abst come not c attributable t	ract for neg hanged), an to lack of up	ative trials: d the interve take and di	Discuss the pention was no scuss reason	primary outo ot used, disc ns. (Note: Or	come - if the trial is cuss whether aly report in the
subitem not at all important	\circ	\circ	\circ	0	\circ	essential
Does your pap Copy and paste relev "like this" to indicate additional informatio your study	ant sections direct quote	s from the m s from your	nanuscript a manuscript	bstract (inclu :), or elaborat	te on this ite	m by providing
Your answer						
INTRODUCTIO	ON					
2a) In INTROE explanation o			tific bad	ckground	d and	
2a-i) Problem Describe the problem alone intervention vs population? Goals of or complement other under 5)	and the typ incorporate the interver	ee of systemed in broade ation, e.g., be	n/solution the r health car eing more co	at is object of e program? I ost-effective	of the study: ntended for to other inte	a particular patier erventions, replace
subitem not at all important	0	0	0	0	0	essential

Does your paper address subitem 2a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 2a-i.

"CHD patients receive the guidance provided on healthy lifestyle changes regarding physical activity (PA) and a healthy diet during rehabilitation in the hospital. However, several studies have revealed that it is often difficult for patients to integrate and transfer these recommendations and learning outcomes into their daily life after discharge from the hospital. Thus, they need internal and external resources, which can be supported by an extended rehabilitation aftercare when they are at home."

"However, in the Eastern Hemisphere, and especially in China, a large body of Web-based rehabilitation interventions only focus on knowledge, education, and learning. Very few integrate individualized and comprehensive interventions that include educational, cognitive, and psychological elements "

2a-ii) Scientific background, rationale: What is known about the (type of) system

Scientific background, rationale: What is known about the (type of) system that is the object of the study (be sure to discuss the use of similar systems for other conditions/diagnoses, if appropiate), motivation for the study, i.e. what are the reasons for and what is the context for this specific study, from which stakeholder viewpoint is the study performed, potential impact of findings [2]. Briefly justify the choice of the comparator.

subitem not at		\bigcirc		\bigcirc	\bigcirc	essential
all important	\circ	0	0	\circ	\circ	essential

Does your paper address subitem 2a-ii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 2a-ii.

"This study applied the Health Action Process Approach (HAPA) as the theoretical backdrop, which suggests that there are 2 distinctive phases during the health behavior change process. '

"Until now, how internal and external resources interplay with lifestyle change in cardiac patients (eg, following recommendations for PA and FVC) has not been fully addressed. Interventions that integrate both internal and external resources may enhance social cognitions, which in turn can lead to the adoption of a healthy lifestyle. Thus, mediation analysis might disclose the underlying mechanisms of such an intervention. All of this has been researched in the Western Hemisphere but not in the Eastern Hemisphere, and therefore, the purpose of this study is to fill this gap."

2b) In INTRODUCTION: Specific objectives or hypotheses



Does your paper address CONSORT subitem 2b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 2b.

!

"The main intervention effects were hypothesized in terms of (1) self-reported increase in PA and FVC behavior (single behavior indicators, hypothesis 1a) and adoption of a healthy lifestyle (hypothesis 1b); (2) more improvements in indicators of internal resources (combination of intention, self-efficacy, and planning) and an indicator of external resources (social support, hypothesis 2); (3) improvement in health outcomes (BMI, quality of life, and depression level, hypothesis 3); and (4) the expectation that those patients who had increased internal resources (combination of intention, self-efficacy, and planning) and an external resource (social support) because of the intervention would be more likely to adopt a healthy lifestyle (mediation effect, hypothesis 4)."

METHODS									
3a) Description of trial design (such as parallel, factorial) including allocation ratio									
Does your paper address CONSORT subitem 3a? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									
Yes, we described trial design in the "Methods" part.									
3b) Important changes to methods after trial commencement (such as eligibility criteria), with reasons									
Does your paper address CONSORT subitem 3b? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									
Nil.									
3b-i) Bug fixes, Downtimes, Content Changes Bug fixes, Downtimes, Content Changes: ehealth systems are often dynamic systems. A description of changes to methods therefore also includes important changes made on the intervention or comparator during the trial (e.g., major bug fixes or changes in the functionality or content) (5-iii) and other "unexpected events" that may have influenced study design such as staff changes, system failures/downtimes, etc. [2].									
subitem not at all important o essential									
Does your paper address subitem 3b-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									
Your answer									
4a) Eligibility criteria for participants									
Does your paper address CONSORT subitem 4a? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									
Yes, we described the eligibility criteria in the "participants" part.									
4a-i) Computer / Internet literacy Computer / Internet literacy is often an implicit "de facto" eligibility criterion - this should be explicitly clarified.									
subitem not at all important essential									
Does your paper address subitem 4a-i? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study									

https://docs.google.com/forms/d/e/1FAIpQLSfZBSUp1bwOc_OimqcS64RdfIAFvmr... 2018/10/29

Your answer

4a-ii) Open vs. closed, web-based vs. face-to-face assessments: Open vs. closed, web-based vs. face-to-face assessments: Mention how participants were recruited (online vs. offline), e.g., from an open access website or from a clinic, and clarify if this was a purely web-based trial, or there were face-to-face components (as part of the intervention or for assessment), i.e., to what degree got the study team to know the participant. In online-only trials, clarify if participants were quasi-anonymous and whether having multiple identities was possible or whether technical or logistical measures (e.g., cookies, email confirmation, phone calls) were used to detect/prevent these.									
subitem not at all important	0	0	0	0	0	essential			
Does your pape Copy and paste relevan to indicate direct quote information not in the r	nt sections f es from your	rom the ma manuscript	nuscript (inc t), or elabora	lude quotes te on this ite	m by provid	ing additional			
Yes, we have addre	essed sub	item 4a-ii							
". A total of 136 pa				d. Of thes	e, 16.2% (22/126)			
were excluded after									
(n=11), no internet	access vi	ia a comp	uter at ho	me (n=4),	or becaus	e they			
declined to particip	oate (n=7)	. Subsequ	ently, 83.8	8% (114/1	36) eligibl	e patients			
fulfilled the online	-	-	-						
during the period of	•				•	,			
and 54 patients (4									
CHD were recruited allocation due to re									
via a computer at I									
Subsequently, 83.8		-	-						
and provided perso			-			-			
rehabilitation. In to				_	-	' -			
the WCG were incl	uded."								
4a-iii) Informat									
Information given durir the informed consent p									
see also item X26), as	this informa								
and may also bias resu	ilts.								
subitem not at	\bigcirc	\bigcirc	\bigcirc	\bigcirc	\bigcirc				
all important	0	0	0	0	0	essential			
Does your pape Copy and paste relevan to indicate direct quote information not in the r	nt sections f es from your	rom the ma manuscript	nuscript (inc t), or elabora	lude quotes te on this ite	m by provid	ing additional			
All patients were ir form.	nformed a	bout the p	ourpose of	f study wit	h an infor	med consent			
4b) Settings ar	nd locati	ons who	ere the c	data wer	e collec	ted			

Does your paper address CONSORT subitem 4b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 4b. please check the "methods" part.

4b-i) Report if outcomes were (self-)assessed through online questionnaires Clearly report if outcomes were (self-)assessed through online questionnaires (as common in web-										
based trials) or other	vise.									
subitem not at all important	0	0	0	0	0	essential				
Does your paper address subitem 4b-i? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this' to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study										
Yes, we have clea questionnaires.	rly reporte	d that all o	outcomes	were asse	essed thro	ugh online				
4b-ii) Report h Report how institutior affiliations with presti with regards to an inte	nal affiliation gious hospit	s are display als or univer	ed to potent sities may at	ial participa ffect volunte	nts [on eheal er rates, use	th media], as , and reactions				
subitem not at all important	0	0	0	0	0	essential				
Does your paper address subitem 4b-ii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this' to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study										
Your answer										
5) The interver allow replicati administered										
5-i) Mention names, credential, affiliations of the developers, sponsors, and owners Mention names, credential, affiliations of the developers, sponsors, and owners [6] (if authors/evaluators are owners or developer of the software, this needs to be declared in a "Conflict of interest" section or mentioned elsewhere in the manuscript).										
subitem not at all important	0	0	0	0	0	essential				
Does your pap Copy and paste releva to indicate direct quot information not in the Your answer	ant sections t tes from you	from the ma r manuscript	nuscript (inc t), or elabora	te on this ite	m by providi	ng additional				
5-ii) Describe 1 Describe the history/o (e.g., focus groups, us with interpreting resul	development ability testin	process of t	he application	on and previ	ous formativ					
subitem not at all important	0	0	0	0	0	essential				

Does your paper address subitem 5-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

5-iii) Revisions Revisions and updatii application/interventi intervention underwe and/or content was "i changing content whi events see item 3b).	ng. Clearly r ion (and cor nt major cha frozen" duri	mention the mparator, if anges durin ng the trial.	applicable) g the evalua Describe dy	evaluated, o ition process namic comp	r describe w s, or whether conents such	r the development h as news feeds or			
subitem not at all important	0	0	0	0	0	essential			
Does your paper address subitem 5-iii? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Your answer									
5-iv) Quality a: Provide information of provided [1], if applica	on quality as			sure accura	cy and quali	ty of information			
subitem not at all important	0	0	0	0	0	essential			
Does your paper address subitem 5-iv? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Your answer									
5-v) Ensure re providing scre flowcharts of Ensure replicability by video, and/or providir should in principle be	eenshot the algo publishing ng flowchart	s/scree orithms the source ts of the alg	n-captu used code, and/c	re video or providing : d. Replicabi	, and/or screenshots lity (i.e., other	providing /screen-capture er researchers			
subitem not at all important	0	0	0	0	0	essential			
Does your paper address subitem 5-v? Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Your answer									
5-vi) Digital pr Digital preservation: It disappear over the cc Archive, webcitation. article). As pages bet are accessible withou	Provide the ourse of the org, and/or on one of the org, and/or orginal login so	URL of the a years; also publishing t	make sure t he source c	he intervent ode or scree	ion is archivenshots/vide	ed (Internet os alongside the			
subitem not at all important	0	0	0	0	0	essential			

Does your paper address subitem 5-vi?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

5-vii) Access

Access: Describe how participants accessed the application, in what setting/context, if they had to pay (or were paid) or not, whether they had to be a member of specific group. If known, describe how participants obtained "access to the platform and Internet" [1]. To ensure access for editors/reviewers/readers, consider to provide a "backdoor" login account or demo mode for reviewers/readers to explore the application (also important for archiving purposes, see vi).

subitem not at all important essential

Does your paper address subitem 5-vii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All website links for the questionnaire surveys at pre and post test, as well as for the weekly intervention programme, were delivered via email.

5-viii) Mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework

Describe mode of delivery, features/functionalities/components of the intervention and comparator, and the theoretical framework [6] used to design them (instructional strategy [1], behaviour change techniques, persuasive features, etc., see e.g., [7, 8] for terminology). This includes an in-depth description of the content (including where it is coming from and who developed it) [1]," whether [and how] it is tailored to individual circumstances and allows users to track their progress and receive feedback" [6]. This also includes a description of communication delivery channels and – if computer-mediated communication is a component – whether communication was synchronous or asynchronous [6]. It also includes information on presentation strategies [1], including page design principles, average amount of text on pages, presence of hyperlinks to other resources, etc. [1]

Does your paper address subitem 5-viii? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 5-viii.

Please check the "intervention" part.

5-ix) Describe use parameters

Describe use parameters (e.g., intended "doses" and optimal timing for use). Clarify what instructions or recommendations were given to the user, e.g., regarding timing, frequency, heaviness of use. If any, or was the intervention used ad libitum.

subitem not at all important essential

Does your paper address subitem 5-ix?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

5-x) Clarify the Clarify the level of hun assistance) in the e-in involved, if any, as wel it is initiated, and the r distinguish between the involvement required figeneralizability).	nan involver tervention o Il as "type of nedium by v ne level of h	ment (care por as co-inter f assistance which the as uman involve	roviders or h vention (deta offered, the sistance is d ement requir	ealth profes ail number a timing and fi lelivered". It i red for the tri	nd expertise requency of t may be necestal, and the le	of professional the support, how ssary to evel of human
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste releva to indicate direct quot information not in the Your answer	nt sections es from you	from the ma ir manuscrip	nuscript (ind t), or elabora	clude quotes ate on this ite	em by providi	ing additional
5-xi) Report an Report any prompts/re SMS) to use the applic between the level of p for a routine application	eminders us cation, what rompts/rem	sed: Clarify if triggered th ninders requi	there were pem, frequence red for the tr	orompts (lett by etc. It may rial, and the I	y be necessa evel of prom	ry to distinguish pts/reminders
subitem not at all important	0	0	0	0	0	essential
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To boost the enga messages were so participants via ph at the 2 measuren offered a 60 renm exchange for their collection waves.	ent as ren none calls nent point inbi (RME	ninders. For sonce per ts to remir s; US \$9) t	urthermore week befo nd the pati elephone	e, the nurs ore each in ents. More recharge o	e contacte itervention eover, patic card as an	ed session and ents were incentive in
5-xii) Describe Describe any co-interv provided in addition to designed as stand-alo necessary to distingui for a routine application	entions (inc the targete ne intervent sh between	cl. training/so ed eHealth in tion. This inc the level of	upport): Clea tervention, a ludes trainin training requ	rly state any s ehealth int ig sessions a ired for the t	intervention ervention ma and support [trial, and the	s that are ay not be 1]. It may be level of training
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste releva to indicate direct quot information not in the	nt sections es from you	from the ma ir manuscrip	nuscript (ind t), or elabora	clude quotes ate on this ite	em by providi	ing additional

assessed

There is no any co-interventions in this study.

6a) Completely defined pre-specified primary and secondary outcome measures, including how and when they were

Does your paper address CONSORT subitem 6a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 6a.

6a-i) Online questionnaires: describe if they were validated for online use and apply CHERRIES items to describe how the

questionnaires If outcomes were obta use and apply CHERR	s were	designe	ed/deplo uestionnaire	yed s, describe i	f they were v	alidated for onl
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste releva				n-i?		
Preparation work study, including the intervention mate optimising websit sample size.	ne develo rials, set	pment ar ting up int	nd validation tervention	on of adar website n	oted Chine nodules, a	se nd
6a-ii) Describe use/dosage) v Describe whether and defined/measured/m process outcomes the	was det I how "use' onitored (le	fined/m ' (including i ogins, logfile	easured intensity of u e analysis, et	/monito ise/dosage) cc.). Use/ado	red was	
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste releva Your answer				a-ii?		
6a-iii) Describe from participa Describe whether, how through emails, feedb	nts wa	s obtain	ned e feedback fi	rom particip		
subitem not at all important	0	0	0	0	0	essential
Does your pap	oer add ant section	ress sub	oitem 6a uscript text	a-iii?		
Your answer						
6b) Any chang with reasons	jes to t	rial outc	comes a	fter the	trial com	nmenced,

Does your paper address CONSORT subitem 6b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

There is no any changes to trial outcomes after the trial commenced.

7a) How sample size was determined
NPT: When applicable, details of whether and how the clustering by care provides or centers was addressed
7a-i) Describe whether and how expected attrition was taken into account when calculating the sample size Describe whether and how expected attrition was taken into account when calculating the sample size.
subitem not at all important
Does your paper address subitem 7a-i? Copy and paste relevant sections from manuscript title (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Your answer
7b) When applicable, explanation of any interim analyses and stopping guidelines
Does your paper address CONSORT subitem 7b? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this' to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study
NA
8a) Method used to generate the random allocation sequence
NPT: When applicable, how care providers were allocated to each trial group
Does your paper address CONSORT subitem 8a? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this' to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study NA
8b) Type of randomisation; details of any restriction (such as blocking and block size)
Does your paper address CONSORT subitem 8b? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this' to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study Nil
9) Mechanism used to implement the random allocation sequence (such as sequentially numbered containers), describing any steps taken to conceal the sequence until interventions were assigned

Does your paper address CONSORT subitem 9? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Researchers implemented the random allocation sequence by using sequentially numbered containers.

10) Who generated the random allocation sequence, who enrolled participants, and who assigned participants to interventions

Does your paper address CONSORT subitem 10? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Researchers in this study generated the random allocation sequence and assigned participants to interventions. Enrollment and follow-up took place from December 2015 to May 2016. Outpatients with CHD were recruited face-to-face by the physician of the research team, with the assistance of a nurse in the cardiac rehabilitation center of a hospital in the south China.

11a) If done, who was blinded after assignment to interventions (for example, participants, care providers, those assessing outcomes) and how



NPT: Whether or not administering co-interventions were blinded to group assignment

11a-i) Specify who was blinded, and who wasn't

Specify who was blinded, and who wasn't. Usually, in web-based trials it is not possible to blind the participants [1, 3] (this should be clearly acknowledged), but it may be possible to blind outcome assessors, those doing data analysis or those administering co-interventions (if any).

Does your paper address subitem 11a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

All participants in this study were not blinded.

11a-ii) Discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

Informed consent procedures (4a-ii) can create biases and certain expectations - discuss e.g., whether participants knew which intervention was the "intervention of interest" and which one was the "comparator"

subitem not at						essentia
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 11a-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

11b) If	relevant,	description	of the	similarity	of	interventions
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(this item is usually not relevant for ehealth trials as it refers to similarity of a placebo or sham intervention to a active medication/intervention)

Does your paper address CONSORT subitem 11b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

NA

12a) Statistical methods used to compare groups for primary and secondary outcomes



NPT: When applicable, details of whether and how the clustering by care providers or centers was addressed

Does your paper address CONSORT subitem 12a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

NA

12a-i) Imputation techniques to deal with attrition / missing

Imputation techniques to deal with attrition / missing values: Not all participants will use the intervention/comparator as intended and attrition is typically high in ehealth trials. Specify how participants who did not use the application or dropped out from the trial were treated in the statistical analysis (a complete case analysis is strongly discouraged, and simple imputation techniques such as LOCF may also be problematic [4]).

subitem not at	\bigcirc	\bigcirc	\bigcirc		\bigcirc	essential
all important	\circ	\circ	\circ	\circ	\circ	essential

Does your paper address subitem 12a-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 12a-i. Please check "data analysis" part.

12b) Methods for additional analyses, such as subgroup analyses and adjusted analyses



Does your paper address CONSORT subitem 12b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 12b. Please check "data analysis" part.

X26) REB/IRB Approval and Ethical Considerations [recommended as subheading under "Methods"] (not a CONSORT item)



X26-i) Comme	ent on e	ethics co	ommitte	e appro	val	
subitem not at all important	0	0	0	0	0	essential
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Your answer						
x26-ii) Outline Outline informed con Checkbox, etc.?), and included in informed	sent proced what infor	dures e.g., if mation was	consent wa	s obtained o	offline or onl	•
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste relev to indicate direct quo information not in the	ant section tes from yo	s from the r our manuscr	nanuscript (ript), or elabo	include quot orate on this	item by pro	viding additional
Your answer						
X26-iii) Safety Safety and security p likelihood or detectio	rocedures,	incl. privacy	considerati	ons, and any		
subitem not at all important	0	0	0	0	0	essential
Does your pap Copy and paste relev to indicate direct quo information not in the	ant section tes from yo	s from the r our manuscr	nanuscript (ript), or elabo	include quot orate on this	item by pro	viding additional
Your answer						
RESULTS						
13a) For each randomly ass analysed for t	igned, r	eceived	intende			
NPT: The number of the number of patie						in each group and
Does your pap Copy and paste relev- to indicate direct quo information not in the	ant section tes from yo	s from the r our manuscr	nanuscript (ript), or elabo	include quot orate on this	es in quotat item by pro	viding additional
Yes, we have indi assigned for each						domly
13b) For each randomisation					after	

Does your paper address CONSORT subitem 13b? (NOTE: Preferably, this is shown in a CONSORT flow diagram) *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed this issue with a flow diagram.

13b-i) Attrition diagram

Strongly recommended: An attrition diagram (e.g., proportion of participants still logging in or using the intervention/comparator in each group plotted over time, similar to a survival curve) or other figures or tables demonstrating usage/dose/engagement.

subitem not at essential all important

Does your paper address subitem 13b-i?

Copy and paste relevant sections from the manuscript or cite the figure number if applicable (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

14a) Dates defining the periods of recruitment and follow-up

Does your paper address CONSORT subitem 14a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have indicated this information in the "Methods" part.

14a-i) Indicate if critical "secular events" fell into the study

Indicate if critical "secular events" fell into the study period, e.g., significant changes in Internet resources available or "changes in computer hardware or Internet delivery resources"

subitem not at essential all important

Does your paper address subitem 14a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

!

14b) Why the trial ended or was stopped (early)



Does your paper address CONSORT subitem 14b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

It did not happen in our study.

15) A table showing baseline demographic and clinical characteristics for each group



NPT: When applicable, a description of care providers (case volume, qualification, expertise, etc.) and centers (volume) in each group

Does y	our	paper	address	CONSORT	subitem	15? *
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Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we described the baseline demographic information for each group in the text rather than showing a table.

15-i) Report demographics associated with digital divide issues

In ehealth trials it is particularly important to report demographics associated with digital divide issues, such as age, education, gender, social-economic status, computer/Internet/ehealth literacy of the participants, if known.

subitem not at	\bigcirc				essentia
all important	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 15-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have reported demographics including age, gender, relationship status.

16) For each group, number of participants (denominator) included in each analysis and whether the analysis was by original assigned groups



16-i) Report multiple "denominators" and provide definitions

Report multiple "denominators" and provide definitions: Report N's (and effect sizes) "across a range of study participation [and use] thresholds" [1], e.g., N exposed, N consented, N used more than x times, N used more than y weeks, N participants "used" the intervention/comparator at specific pre-defined time points of interest (in absolute and relative numbers per group). Always clearly define "use" of the intervention.

subitem not at	\bigcirc				\bigcirc	essentia
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 16-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

NA

16-ii) Primary analysis should be intent-to-treat

Primary analysis should be intent-to-treat, secondary analyses could include comparing only "users", with the appropriate caveats that this is no longer a randomized sample (see 18-i).

subitem not at			\bigcirc			essentia
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 16-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

17a) For each primary and secondary outcome, results for each group, and the estimated effect size and its precision (such as 95% confidence interval)



Does your paper address CONSORT subitem 17a? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 17a by providing the primary and secondary outcomes for each group as well as the estimated effect size.

17a-i) Presentation of process outcomes such as metrics of use and intensity of use

In addition to primary/secondary (clinical) outcomes, the presentation of process outcomes such as metrics of use and intensity of use (dose, exposure) and their operational definitions is critical. This does not only refer to metrics of attrition (13-b) (often a binary variable), but also to more continuous exposure metrics such as "average session length". These must be accompanied by a technical description how a metric like a "session" is defined (e.g., timeout after idle time) [1] (report under item 6a).

subitem not at	\bigcirc	\bigcirc		\bigcirc	\bigcirc	essential
all important	\circ	\circ	\circ	\circ	\circ	essentiai

Does your paper address subitem 17a-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

17b) For binary outcomes, presentation of both absolute and relative effect sizes is recommended



Does your paper address CONSORT subitem 17b? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 17b and reporting the effect size for the binary outcomes.

18) Results of any other analyses performed, including subgroup analyses and adjusted analyses, distinguishing prespecified from exploratory

Does your paper address CONSORT subitem 18? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we conducted dropout analysis and randomization check.

18-i) Subgroup analysis of comparing only users

A subgroup analysis of comparing only users is not uncommon in ehealth trials, but if done, it must be stressed that this is a self-selected sample and no longer an unbiased sample from a randomized trial (see 16-iii).

subitem not at all important	\bigcirc	\circ	\circ	\circ	\circ	essential

Does your paper address subitem 18-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

19) All importa	int harn	ns or ur	nintende	d effect	s in eac	h group		
(for specific guidance see CONSORT for harms)								
Copy and paste releva to indicate direct quote	Does your paper address CONSORT subitem 19? * Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study							
There was no harr	n in our s	tudy.						
19-i) Include privacy breaches, technical problems Include privacy breaches, technical problems. This does not only include physical "harm" to participants, but also incidents such as perceived or real privacy breaches [1], technical problems, and other unexpected/unintended incidents. "Unintended effects" also includes unintended positive effects [2].								
subitem not at all important	0	0	0	0	0	essential		
Does your pap Copy and paste releva to indicate direct quote information not in the	nt sections es from you	from the m ur manuscri	nanuscript (ir pt), or elabo	nclude quot rate on this	item by prov	iding additional		
Your answer								
observations f Include qualitative fee on strengths and short unintended/unexpecte did not use the applica	dback from comings o d effects o	participant f the applic r uses. This	ts or observa ation, especi includes (if	ally if they p available) r	point to			
Does your pap Copy and paste releva to indicate direct quote information not in the	nt sections es from you	from the m ur manuscri	nanuscript (ir pt), or elabo	nclude quot rate on this	item by prov	iding additional		
Your answer								
DISCUSSION	7							
22) Interpretat and harms, and						benefits		
NPT: In addition, take and unequal expertis						partial blinding,		
22-i) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use) Restate study questions and summarize the answers suggested by the data, starting with primary outcomes and process outcomes (use).								
subitem not at all important	0	0	0	0	0	essential		

Does your paper address subitem 22-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, corresponding to each hypothesis, we summarized the answers, starting with primary outcomes and secondary outcomes.

22-ii) Highlight unanswered new questions, suggest future research

Highlight unanswered new questions, suggest future research.

subitem not at						
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 22-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

20) Trial limitations, addressing sources of potential bias, imprecision, and, if relevant, multiplicity of analyses



20-i) Typical limitations in ehealth trials

Typical limitations in ehealth trials: Participants in ehealth trials are rarely blinded. Ehealth trials often look at a multiplicity of outcomes, increasing risk for a Type I error. Discuss biases due to non-use of the intervention/usability issues, biases through informed consent procedures, unexpected events.

subitem not at	\bigcirc					essentia
all important	\circ	\circ	\circ	\circ	\circ	essentia

Does your paper address subitem 20-i? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Yes, we have addressed subitem 20-i, please check the "limitations" part.

21) Generalisability (external validity, applicability) of the trial findings



NPT: External validity of the trial findings according to the intervention, comparators, patients, and care providers or centers involved in the trial

21-i) Generalizability to other populations

Generalizability to other populations: In particular, discuss generalizability to a general Internet population, outside of a RCT setting, and general patient population, including applicability of the study results for other organizations

subitem not at all important	\circ	\circ	\circ	\circ	\circ	essential

Does your paper address subitem 21-i?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Your answer

21-ii) Discuss if there were elements in the RCT that would be different in a routine application setting

Discuss if there were elements in the RCT that would be different in a routine application setting (e.g., prompts/reminders, more human involvement, training sessions or other co-interventions) and what impact the omission of these elements could have on use, adoption, or outcomes if the intervention is applied outside of a RCT setting.

subitem not at essential all important

Does your paper address subitem 21-ii?

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

OTHER INFORMATION

23) Registration number and name of trial registry

Does your paper address CONSORT subitem 23? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This study was registered with ClinicalTrials.gov (NCT01909349).

24) Where the full trial protocol can be accessed, if available

Does your paper address CONSORT subitem 24? *

Cite a Multimedia Appendix, other reference, or copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

Reinwand D, Kuhlmann T, Wienert J, de Vries H, Lippke S. Designing a theory and evidence-based tailored eHealth rehabilitation aftercare program in Germany and the Netherlands: study protocol. BMC public health; 2013 Nov 19;13(1):1. PMID: 24245493. DOI: 10.1186/14712458131081.

25) Sources of funding and other support (such as supply of drugs), role of funders

Does your paper address CONSORT subitem 25? *

Copy and paste relevant sections from the manuscript (include quotes in quotation marks "like this" to indicate direct quotes from your manuscript), or elaborate on this item by providing additional information not in the ms, or briefly explain why the item is not applicable/relevant for your study

This research was supported by a junior research group grant from the Wilhelm-Stiftung für Rehabilitationsforschung in Germany and Faculty Research Grant from Hong Kong Baptist University in Hong Kong (FRG1/12-13/064).

X27) Conflicts of Interest (not a CONSORT item)

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